

## Substitute Bill No. 5334

February Session, 2008

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## AN ACT CONCERNING TIMELY MEDICAL TREATMENT FOR INJURED WORKERS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- Section 1. Section 31-294d of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2008*):
  - (a) (1) The employer, as soon as the employer has knowledge of an injury, shall provide a competent physician or surgeon to attend the injured employee and, in addition, shall furnish any medical and surgical aid or hospital and nursing service, including medical rehabilitation services and prescription drugs, as the physician or surgeon deems reasonable or necessary. The employer, any insurer acting on behalf of the employer, or any other entity acting on behalf of the employer or insurer shall be responsible for paying the cost of such prescription drugs directly to the provider.
  - (2) If the injured employee is a local or state police officer, state marshal, judicial marshal, correction officer, emergency medical technician, paramedic, ambulance driver, firefighter, or active member of a volunteer fire company or fire department engaged in volunteer duties, who has been exposed in the line of duty to blood or bodily fluids that may carry blood-borne disease, the medical and surgical aid or hospital and nursing service provided by the employer shall include any relevant diagnostic and prophylactic procedure for and treatment

of any blood-borne disease.

- (b) The employee shall select the physician or surgeon from an approved list of physicians and surgeons prepared by the chairman of the Workers' Compensation Commission. If the employee is unable to make the selection, the employer shall do so, subject to ratification by the employee or his next of kin. If the employer has a full-time staff physician or if a physician is available on call, the initial treatment required immediately following the injury may be rendered by that physician, but the employee may thereafter select his own physician as provided by this chapter for any further treatment without prior approval of the commissioner.
- (c) The commissioner may, without hearing, at the request of the employer or the injured employee, when good reason exists, or on his own motion, authorize or direct a change of physician or surgeon or hospital or nursing service provided pursuant to subsection (a) of this section.
- (d) The pecuniary liability of the employer for the medical and surgical service required by this section shall be limited to the charges that prevail in the same community or similar communities for similar treatment of injured persons of a like standard of living when the similar treatment is paid for by the injured person. The liability of the employer for hospital service shall be the amount it actually costs the hospital to render the service, as determined by the commissioner, except in the case of state humane institutions, the liability of the employer shall be the per capita cost as determined by the Comptroller under the provisions of section 17b-223. All disputes concerning liability for hospital services in workers' compensation cases shall be settled by the commissioner in accordance with this chapter.
- (e) If the employer fails to promptly provide a physician or surgeon or any medical and surgical aid or hospital and nursing service as required by this section, the injured employee may obtain a physician or surgeon, selected from the approved list prepared by the chairman,

or such medical and surgical aid or hospital and nursing service at the expense of the employer.

(f) If an employer has good cause to believe that proposed treatment recommended by a (1) medical provider participating in an employer medical care plan approved pursuant to the provisions of section 31-279; (2) physician identified in an approved voluntary agreement pursuant to section 31-296 of the 2008 supplement to the general statutes; or (3) provider to whom the employee has been referred by such physician or medical provider for treatment, is unreasonable and unnecessary, the employer shall promptly issue a written notice to the employee and employee's representative, if any, indicating the medical evidence upon which it relies for concluding that the proposed treatment is either unnecessary or unreasonable. If the employer wishes to support its denial of such treatment by a medical examination pursuant to section 31-294f, as amended by this act, the employer shall forthwith, and in all events not later than thirty days from the receipt of the recommendation of the proposed treatment from such medical provider or physician, schedule its medical examination as authorized in subsection (a) of section 31-294f, as amended by this act.

(g) Whenever an examination requested by the employer pursuant to subsection (a) of section 31-294f, as amended by this act, results in concurrence that the proposed treatment recommended by a medical provider or physician described in subdivisions (1) to (3), inclusive, of subsection (f) of this section was reasonable and necessary, the employer shall pay the employee (1) for total incapacity, one hundred per cent of the employee's average weekly earnings after such earnings have been reduced by any deduction for federal or state taxes or both, and for the federal Insurance Contributions Act made from such employee's total wages received during the period of calculation, as described in subsection (a) of section 31-307; or (2) for partial incapacity, one hundred per cent of the difference, as described in subsection (a) of section 31-308. The payments described in subdivisions (1) and (2) of this subsection shall be provided for the

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- period the employee's treatment was delayed by the employer 86 87 provided the employee is otherwise eligible for benefits for total or 88 partial incapacity. If an employer fails to schedule a medical 89 examination pursuant to the provisions of subsection (a) of section 31-90 294f, as amended by this act, by the date thirty days after the date of 91 such employer's receipt of a recommendation for treatment, the 92 employee, in any proceeding resulting in authorization of such 93 treatment, shall be entitled to recover reasonable attorney's fees arising 94 out of the employee's claim for the recommended treatment.
  - Sec. 2. Section 31-294f of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2008*):
  - (a) An injured employee shall submit himself to examination by a reputable practicing physician or surgeon, at any time while claiming or receiving compensation, upon the reasonable request of the employer or at the direction of the commissioner. The examination shall be performed to determine the nature of the injury and the incapacity resulting from the injury. The physician or surgeon shall be selected by the employer from an approved list of physicians and surgeons prepared by the chairman of the Workers' Compensation Commission and shall be paid by the employer. At any examination requested by the employer or directed by the commissioner under this section, the injured employee shall be allowed to have in attendance any reputable practicing physician or surgeon that the employee obtains and pays for himself or to record such examination by way of any medium which creates an audio or video recording. The employee shall submit to all other physical examinations as required by this chapter. The refusal of an injured employee to submit himself to a reasonable examination under this section shall suspend his right to compensation during such refusal.
  - (b) All medical reports concerning any injury of an employee sustained in the course of his employment shall be furnished within thirty days after the completion of the reports, at the same time and in the same manner, to the employer and the employee or his attorney.

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Sec. 3. Subsection (b) of section 31-288 of the 2008 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2008*):

(b) (1) Whenever through the fault or neglect of an employer or insurer, the adjustment or payment of compensation due under this chapter or the provision of reasonable and necessary medical treatment is unduly delayed, such employer or insurer may be assessed by the commissioner hearing the claim a civil penalty of not more than one thousand dollars for each such case of delay, to be paid to the claimant. For purposes of this subsection, the failure to promptly provide medical services recommended by a (A) medical provider participating in an employer medical care plan approved pursuant to the provisions of section 31-279; (B) physician identified in an approved voluntary agreement pursuant to section 31-296 of the 2008 supplement to the general statutes; or (C) provider to whom the employee has been referred by such medical provider or physician for recommended treatment, shall be presumed to be the unreasonable delay of treatment without good cause unless the commissioner finds the recommended medical care was neither reasonable or necessary at the time such care was recommended.

(2) Whenever either party to a claim under this chapter has unreasonably, and without good cause, delayed the completion of the hearings on such claim, the delaying party or parties may be assessed a civil penalty of not more than five hundred dollars by the commissioner hearing the claim for each such case of delay. Any appeal of a penalty assessed pursuant to this subsection shall be taken in accordance with the provisions of section 31-301 of the 2008 supplement to the general statutes.

This act shall take effect as follows and shall amend the following sections:				
Section 1	October 1, 2008	31-294d		
Sec. 2	October 1, 2008	31-294f		
Sec. 3	October 1, 2008	31-288(b)		

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